	Application or Docket Number
ATENT ADDITOATION FEE DETERMINATION DECORD	

PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS		13]	RATE	FEE]	RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE		
TOTAL CHARGEABLE CLAIMS			44 minus 20=		. 24			X\$ 9=		OR	X\$18=	432.00
INDEPENDENT CLAIMS			2 mi	nus 3 =	*			X40=			X80=	. 12 C TU
MULTIPLE DEPENDENT CLAIM PRESE			RESENT			Ħ				OR		
* If the difference in column 1 is less than zero enter "O" in column 2						'	+135=		OR	+270=	270-00	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL		
	С	(Column 1)	MENDED - PART II (Column 2) (Column 3)			<u>i_</u>	SMALL ENTITY (OTHER THAN R SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL .FEE		RATE	ADDI- TIONAL FEE
NOM	Total	*	Minus	**	-	=		X\$ 9=		OR	X\$18=	
AME	Independent	•	Minus	***		=	li	X40=		OR	X80=	8- 61.
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT	CLATM		! [.105			.070	
· · · · · · · · · · · · · · · · · · ·						Į	+135= TOTAL		OR	+270= TOTAL		
	•				•			ADDIT. FEE		OR	ADDIT. FEE	
_		(Column 1) CLAIMS		(Colui		(Column 3)	, 7 r		4001	1	ne, je stoletje	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	**;	···. · · · · · · · · · · · · · · ·	<u> </u>] [X40=		OR	X80=	
L	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		┚┟	+135=	·	OR.	+270=	
			= '	•	•		L	TOTAL			TOTAL	
		(Calumn 1)		 (Oalum	O\	(Oaluman 0)		ADDIT. FEE		Uh	ADDIT. FEE	
,.		(Column 1) CLAIMS		(Colur HIGH	EST	(Column 3)	1 r		ADDI			4001
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO _PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** ,		=	1 f	X\$ 9=		OR	X\$18=	1 22
	Independent	•	Minus	***		=] 	X40=	·		X80=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM]	740-		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
		ber Previously Pai					ar foui	nd in the ann	ropriate box	in col	umn 1	